

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IP NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER		21	11/16/01
FORMALTY REVIEW	A. M.	76 SEP	01-24-01
RESPONSE FORMALTY REVIEW	Am	857	8/21/01

# INDEX OF CLAIMS

✓ \_\_\_\_\_ Rejected  
 ✓ \_\_\_\_\_ Allowed  
 ✓ (Through summary) \_\_\_\_\_ Cancelled  
 ✓ \_\_\_\_\_ Restricted  
 ✓ \_\_\_\_\_ Non-classified  
 ✓ \_\_\_\_\_ Discrepancy  
 ✓ \_\_\_\_\_ Appeal  
 ✓ \_\_\_\_\_ Objected

Claim	Date	Claim	Date	Claim	Date
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If more than 150 claims or 10 actions  
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